

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 39
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elisabeth Jensen for Congress

A. Full Name (Last, First, Middle Initial) Steve Tuchman		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 2500 One American Square		Transaction ID : C8858357	
City Indianapolis	State IN	Zip Code 46282	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Lewis Kappes	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		
B. Full Name (Last, First, Middle Initial) Michael Ward		Date of Receipt M M / D D / Y Y Y Y 06 / 17 / 2013	
Mailing Address 1905 Deer Park Ave.		Transaction ID : C8856533	
City Louisville	State KY	Zip Code 40205	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Ward Campaigns, Inc.	Occupation Consultant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		
C. Full Name (Last, First, Middle Initial) Stacy Berge		Date of Receipt M M / D D / Y Y Y Y 06 / 24 / 2013	
Mailing Address 2136 Lakeside Ct.		Transaction ID : C886643A	
City Lexington	State KY	Zip Code 40502	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Gaines Gentry Thoroughbred	Occupation Business Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		
SUBTOTAL of Receipts This Page (optional).....		_____ 1000.00	
TOTAL This Period (last page this line number only).....		_____	